ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 5 | 5 08-01 |
| FORMALITY REVIEW | 8A | 457 | 05-14-01 |
| RESPONSE FORMALITY REVIEW | 866 | 1091 | 8-16-01 |

## INDEX OF CLAIMS

| | | | | | |
|---|---|---|---|---|---|
| ✔ | ..... Rejected | | N | ..... | Non-elected |
| = | ..... Allowed | | I | ..... | Interference |
| — | (Through numeral)... Canceled | | A | ..... | Appeal |
| ÷ | ..... Restricted | | O | ..... | Objected |



If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)